

**SUPERIOR COURT OF CALIFORNIA, COUNTY OF PLACER**  
**Court-Appointed Counsel Reclassification Application and Agreement**

**1. Contact Information**

- a. Name: \_\_\_\_\_ California SBN: \_\_\_\_\_
- b. Mailing address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
- c. E-mail: \_\_\_\_\_
- d. Daytime phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

**2. Appointment Requests**

- a. I am willing to serve at the following court locations:  
☐ South Placer ☐ Auburn ☐ Tahoe City
- b. I am willing to serve as a court-appointed attorney in the following types of cases (*choose all that apply*):  
☐ Capital felony ☐ Non-capital felony ☐ Misdemeanor ☐ Juvenile Justice (W&I 600)  
☐ Civil ☐ Guardianship ☐ Conservatorship ☐ Other: \_\_\_\_\_
- c. I am unable to serve as follows (*Describe and explain*): \_\_\_\_\_  
\_\_\_\_\_

**3. Professional and Personal Qualifications**

- a. Are you fluent in a language other than English?  
☐ No ☐ Yes - please list language(s): \_\_\_\_\_
- b. Date of admission to the bar: \_\_\_\_\_ Number of years of active membership: \_\_\_\_\_
- c. Have you ever been disciplined by the State Bar of California or by a bar association or other professional licensing entity in any state or by a court of record, including being sanctioned or held in contempt of court?  
(*If yes, please provide explanation with dates in a separate attachment.*)  
☐ No ☐ Yes
- d. Do you have or have you had any disciplinary action pending against you by the State Bar of California or by a bar association or other professional licensing agency in any state or by a court of record, including any proceeding for the imposition of sanctions or for contempt? (*If yes, please provide explanation with dates in a separate attachment.*)  
☐ No ☐ Yes
- e. Have you ever been convicted or pleaded no contest to a felony or a misdemeanor? (*If yes, please provide explanation in a separate attachment. Include dates, dispositions, and case numbers.*)  
☐ No ☐ Yes
- f. Have you ever been a party to a legal proceeding? (*If yes, please provide explanation in a separate attachment. Include dates, dispositions, and case numbers.*)  
☐ No ☐ Yes
- g. Has a Marsden Motion filed against you ever been granted? (*If yes, please provide the date(s) and in what jurisdiction/department any hearings took place.*)  
☐ No ☐ Yes
- h. Have you ever been denied entry and/or been involuntarily removed from an appointment list in another court or county? (*If yes, please provide explanation with dates in a separate attachment.*)  
☐ No ☐ Yes
- i. ☐ I am certified as a specialist by the State Bar of California Board of Legal Specialization or by an organization whose certification program is accredited by the State Bar of California.  
Area(s) of specialization: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### 4. Practical Experience

- a. Number of years of litigation experience in:

Adult felony:	Juvenile misdemeanor:
Adult misdemeanor:	Guardianship:
Juvenile felony:	Conservatorship:

- b. Number of cases handled as lead counsel:

Adult felony:	Juvenile misdemeanor:
Adult misdemeanor:	Guardianship:
Juvenile felony:	Conservatorship:

- c. Number of cases handled, as lead counsel, that proceeded to disposition:

Adult felony:	Juvenile misdemeanor:
Adult misdemeanor:	Guardianship:
Juvenile felony:	Conservatorship:

- d. Number of cases handled, as lead counsel, that proceeded to a jury for decision:

Adult felony:	Juvenile misdemeanor:
Adult misdemeanor:	Guardianship:
Juvenile felony:	Conservatorship:

- e. List the county and/or jurisdiction, case name(s) and case number(s), and dates for the last five (5) cases in which you filed either a PC 995 motion or PC 1538.5 motion as lead counsel (*Use separate page if necessary*):

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- f. List the county and/or jurisdiction, case name(s) and case number(s), and dates of your last five (5) jury trials handled as lead counsel. Provide judicial officer's name and department, as well as the names, addresses, and phone numbers of opposing counsel (*Use separate page if necessary*):

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#### 5. Attachments

The following documents must be attached to your application:

- ☐ An up-to-date record of MCLE courses completed
- ☐ Errors and Omissions Insurance Policy
- ☐ GC-010 (*if applying for guardianship/conservatorship*)

### **CERTIFICATION**

I understand and acknowledge that the selection and appointment of a court-appointed attorney is solely at the discretion of the court. I hereby certify that all statements made in this entire application, including attachments, are true and complete to the best of my knowledge. I understand that any false, incomplete, or incorrect statement, regardless of when it is discovered, may result in my disqualification or dismissal as Court Appointed Counsel. I have read both the State Bar of California's Rules of Professional Conduct and the civility pledge, and as an officer of the court I will strive to conduct myself at all times with dignity, courtesy, and integrity.

Date: \_\_\_\_\_

\_\_\_\_\_  
TYPE OR PRINT NAME

\_\_\_\_\_  
SBN



\_\_\_\_\_  
SIGNATURE OF APPLICANT

### **WAIVER AND AUTHORIZATION FOR RELEASE OF INFORMATION**

I have applied to be Court Appointed Counsel in the Superior Court of California, County of Placer. I hereby authorize the State Bar of California and the attorney-licensing authority in any other state where I am admitted to practice law to release to an authorized representative of the court, for up to 90 days after the date of my signature, information regarding the following matters:

- (1) Whether I am in good standing or am authorized to practice law as a member of the State Bar of California or as an attorney in any other state where I am admitted to practice law;
- (2) Whether I have a record of discipline with the State Bar of California or with the licensing authority for attorneys in any other state where I am admitted to practice law; and
- (3) Whether any disciplinary investigation or proceeding is pending against me by the State Bar of California or by the licensing authority for attorneys in any other state where I am admitted to practice law.

Date: \_\_\_\_\_

\_\_\_\_\_  
TYPE OR PRINT NAME

\_\_\_\_\_  
SBN



\_\_\_\_\_  
SIGNATURE OF APPLICANT

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